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REPORT OF THE EXECUTIVE DIRECTOR FOR 1997: REGIONAL OVERVIEW

1. During 1997, UNFPA continued to assist countries in all regions of the world in advancing the implementation of the Programme of Action of the International Conference on Population and Development (ICPD). The work of the Fund focused on its three programme priority areas: reproductive health, including sexual health and family planning; population and development strategies; and advocacy. Key themes that featured in and informed the work of UNFPA included: addressing the reproductive health needs of young people; promoting reproductive rights; strengthening national capacity; increasing the range of and access to quality reproductive health services; and encouraging partnerships with non-governmental organizations (NGOs) and other groups in civil society. Women's empowerment and gender issues remained cross-cutting dimensions of all of the Fund's work.

2. The Fund's coordination and collaboration with other United Nations agencies and organizations in all regions continued to expand in 1997, with increased levels of communication and cooperation, including through regular meetings of various theme groups, such as on gender, the environment, and HIV/AIDS. In all countries, UNFPA is a full and active participant in the United Nations Resident Coordinator system. The United Nations Development Assistance Framework (UNDAF) process also contributed to enhanced inter-agency collaboration. UNFPA has worked closely with other sister agencies of the United Nations system in the preparation of the UNDAF document in the countries participating in the pilot phase. Other mechanisms such as the inter-agency task forces of the Administrative Committee on Coordination (ACC) and the United

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Nations Development Group (UNDG) have also led to expanded inter-agency cooperation. As in previous years, the Fund continued collaborative efforts and joint initiatives with, inter alia, UNICEF, UNDP, UNHCR, UNAIDS, WHO and the World Bank. In addition, partnerships with regional organizations, as well as international and national NGOs have been strengthened. Examples of such activities are contained in all three parts of this annual report.

AFRICA

3. The implementation of population programmes in sub-Saharan Africa continued to progress during the year, inter alia, as a result of increased awareness and commitment among policy makers, and traditional and religious leaders. By the end of 1997, 23 African countries had officially adopted population policies and 11 others were in the process of doing so. Several countries are revising their population policies to include the goals and recommendations of the ICPD Programme of Action. Throughout the region, efforts are under way to increase partnerships among Government, local NGOs, women's groups, youth groups and local communities in the design and implementation of population activities. Also visible is an increase in the technical expertise available at the country level. In this regard, UNFPA Country Support Teams (CSTs) have continued to help build national capacity for population and development programme implementation. However, despite these noticeable advances, political and social instabilities in the region have contributed to a slowing down in the momentum of programme implementation and expenditure levels.

4. Fifteen Programme Review and Strategy Development (PRSD) exercises were undertaken in the Africa region during 1997 and were characterized by greater participation of nationals, both governmental and non-governmental. This helped to generate a shared sense of ownership and commitment to programme planning and implementation. In addition to four subregional meetings for UNFPA country representatives, a regional meeting was organized in Harare, Zimbabwe, in November, to review progress in implementing the ICPD Programme of Action.

5. The Fund continued its assistance to the Organization of African Unity (OAU), which, together with the African Population Commission, organized a meeting to review issues such as population and conflict in Africa, the implementation of the Dakar-Ngor Declaration and the ICPD Programme of Action and to prepare for the ICPD + 5 review and appraisal. Representatives from 42 countries in Africa participated in the meeting. At a technical meeting to review progress in the implementation of the Special Initiative on Africa, UNFPA led a session focusing on mainstreaming population and gender in the context of the Special Initiative. The Fund also engaged in strengthening its collaboration in the region with, inter alia, UNICEF, UNHCR, WHO and the World Bank.

6. A key highlight of the year was the African Forum on Adolescent Reproductive Health, held in Addis Ababa, Ethiopia, in January, and organized by UNFPA in collaboration with the Center for Development and Population Activities (CEDPA). The meeting brought together approximately 500 participants, including some 200 youth from 48 countries. The Forum, which provided opportunities to strengthen youth networks and stimulate youth involvement in population activities, focused on such themes as the impact of religion, culture and society on adolescent reproductive health; policy and legislation on adolescent reproductive health; and reaching adolescents through family life education and information, education and communication (IEC) strategies. The recommendations and resolutions emerging from the Forum have been presented to the OAU Council of Ministers.

7. Reproductive health. The year 1997 witnessed further advances in adapting the maternal and child health (MCH) and family planning (FP) approach to a reproductive health approach, including family planning and sexual health. Throughout the region, UNFPA provided support to government efforts to develop a clearer vision of comprehensive reproductive health services and programming. However, despite achievements in this area, two key constraints in the region remain: limited coverage in terms of access to and availability of a range of reproductive health services; and an insufficient number of trained personnel to deliver such services.

8. To advance the process of operationalizing reproductive health programmes, an expert consultation took place in Addis Ababa in January. The meeting was attended by national experts from Burkina Faso, Ethiopia, Ghana, Guinea, Malawi, Uganda and Senegal, as well as representatives from United Nations agencies and The Population Council. The recommendations that emerged from the meeting have been incorporated in a guidance note on operationalizing reproductive health, taking into account the diversity of needs and resources in the region.

9. UNFPA has actively assisted Governments in the region in mobilizing community groups, grass-roots associations, NGOs and local leaders to promote the use of reproductive health services. Efforts have also focused on sensitizing leadership groups on such issues as maternal mortality, adolescent health needs, and male responsibility and involvement. As a result, religious leaders have become important allies and are playing a major advocacy role in the implementation of reproductive health activities in Ghana, Namibia, Niger, Uganda and Senegal. Successful male participation in reproductive health, including use of services, has also increased in several countries in the region, including in Ghana, Namibia and the United Republic of Tanzania. Training programmes in the region have also been brought in line to reflect the concept of reproductive health. UNFPA has been supporting the regional programme for Training of Trainers in Reproductive Health, in Mauritius, as well as the centres providing IEC training located in Abidjan, Côte d'Ivoire, and Nairobi, Kenya.

10. Addressing adolescent reproductive health needs has been an important dimension of UNFPA support. Thus, the Fund has provided assistance for family life education, HIV/AIDS prevention and reproductive health and counselling services focusing on meeting the needs of youth. These activities seek to enable young people to make responsible decisions about their sexual behaviour. Several countries in the region have recorded an increase in the use of multi-purpose youth centres that provide youth-friendly reproductive health information, counselling and services. These countries include Botswana, Cape Verde, Eritrea, Malawi, Namibia, Swaziland, Senegal and Uganda. Innovative approaches are also being used to reach young people. Angola, for example, is piloting the promotion of responsible behaviour among adolescents by using peer counselling; meanwhile, Ghana, Lesotho and Nigeria are using the approach of educating parents, particularly fathers and mothers-in-law, as a way of reaching youth and adolescents. In the United Republic of Tanzania, a hotline has been set up to provide reproductive health information to adolescents and to facilitate their access to services.

11. Population and development strategies. During 1997, UNFPA also continued to invest in the key programme priority area of population and development strategies. The Governments of Botswana, Côte d'Ivoire and Namibia approved comprehensive national population policies in 1997 and put in place institutional structures to incorporate the recommendations of the ICPD Programme of Action in their respective population policies. Mozambique, South Africa, Togo and Zimbabwe are in the process of finalizing their population policies. Angola and Swaziland have each constituted a task force to draft a population policy statement as well as a time-bound programme for policy implementation.

12. To strengthen national activities in population and development, UNFPA supported the first ministerial conference on population policies in the Sahelian countries, organized in October by the Permanent Interstate Committee for Drought Control in the Sahel (CILSS) and the Centre d'Etudes et de Recherches sur la Population et le Développement (CERPOD). The conference adopted an action plan integrating the recommendations of the Forum of Sahelian Societies which was held in Banjul, the Gambia, in September. The plan emphasizes basic health and education services for children with special attention to the girl child.

13. In several countries, population data, particularly demographic data, are needed to better integrate population variables into national development plans and sectoral programmes. UNFPA continued support for this area, including Demographic Health Surveys (DHS) in Cape Verde, Chad, Eritrea, Rwanda and Senegal. Data collection, especially through the conduct of censuses, is on the agenda of most African countries. Many of these countries have benefited from UNFPA support. However, there is a severe shortfall in resources for the 2000 round of censuses, and more donor support is needed. To help raise awareness among donors on the need for census funding, particularly for the 2000 round of censuses, UNFPA, in collaboration with the Interagency Census

Coordination Committee (ICCC), hosted a meeting in New York, in September. The meeting was attended by 13 bilateral donors, the United States Bureau of Census and various United Nations bodies.

14. With a view to building sustainability, the Fund has initiated a review of some of its regional programmes. As regards the Institut de Formation et de Recherche Démographiques (IFORD), in Yaoundé, Cameroon, and the Regional Institute of Population Studies (RIPS) in Accra, Ghana, UNFPA has continued to pursue a shift in its funding modality -- from support to such regional demographic training institutes to national-level demographic, and population and development training institutes, in order to help build technical capacity and develop the critical mass of trained personnel needed to effectively respond to national needs.

15. Advocacy. UNFPA provided assistance to NGOs, parliamentarians, and women's groups in the region to undertake a variety of advocacy activities, in 1997, aiming at, inter alia, eradicating harmful practices, including female genital mutilation (FGM); promoting reproductive health and reproductive rights; removing discriminatory laws and practices against women; and promoting adolescent reproductive health. For example, UNFPA has provided support to Chad and Mauritania to develop family codes that take into account the revision of existing laws that discriminate against women, and to Niger, to seek the support and lessen the opposition of religious and traditional leaders to reproductive health programmes. The Fund also organized a symposium on the elimination of juridical barriers to sexual and reproductive health in Francophone sub-Saharan Africa. In Malawi, an advocacy video, focusing on the plight of adolescent mothers, won a prestigious award for the best television programme in Africa addressing a gender-related problem for the year 1996-1997. Entitled "The Voices of Young Mothers", the video was produced by UNFPA.

16. As part of its advocacy efforts, UNFPA funded the inaugural general conference of the Forum of Africa and Arab Parliamentarians on Population and Development (FPAAPD) which brought together parliamentarians and population specialists from the two regions. The conference took place in Cape Town, South Africa, in May 1997. Several countries have begun to implement the recommendations that emerged from the forum, including the setting up of parliamentarian groups on population and development. In Gabon and Uganda, to increase awareness and mobilize political and financial commitment, UNFPA initiated and supported a series of seminars for parliamentarians on such topics as reproductive health, including the needs of adolescents; gender equity and equality; and poverty issues. The inauguration of the Ugandan Parliamentarians Forum on Food Security, Population and Development and of the Advocacy Coalition Team (ACT) is helping to increase awareness and stimulate community involvement and participation in population programmes.

ARAB STATES AND EUROPE

Arab states

17. In the Arab states region, Governments continued to demonstrate commitment to addressing population issues and implementing the ICPD Programme of Action. The Ministers of Planning of the Gulf Cooperation Council (GCC) have decided to develop a framework for a subregional population strategy. Throughout the region, increased attention is being focused on promoting reproductive health and women's empowerment. To highlight these key issues, a regional forum on reproductive health, women and development was held in Bahrain in September.

18. Reproductive health. During 1997, UNFPA supported a range of reproductive health activities in the region, including: increasing access to reproductive health information and services; providing training to service providers; standardizing guidelines and protocols; providing contraceptives and basic medical equipment; and promoting partnerships with NGOs. At the heart of UNFPA programming in the region is an emphasis on building national capacity for the delivery and management of sustainable reproductive health services. Management training supported by the Fund has enabled health administrators in several countries in the region to implement effective measures to improve service delivery efficiency and strengthen personnel management and management information systems.

19. UNFPA-supported country programmes in the region intensified their efforts to raise awareness about the reproductive health needs of young people and underscoring the importance of removing barriers to the provision of reproductive health information and services. The Ministry of Health in Bahrain, with technical assistance from UNFPA, has developed a reproductive health strategy for adolescents which aims at upgrading services and information in order to reach 50 per cent of youth and adolescents by the year 2008. In Egypt, UNFPA is supporting an IEC project under which two national NGOs have provided training to 200 peer educators who in turn have trained 3,000 young men and women on reproductive health and gender issues.

20. Through summer youth camps and community-based initiatives, NGOs are playing an important role in addressing the reproductive health needs of young people in Jordan. In Tunisia, the National Family and Population Office, with UNFPA support, has launched an innovative project to reach out-of-school and at-risk youth and facilitate their access to reproductive health services and information. In Yemen, innovative communication strategies have been implemented to reach rural youth through peer groups of the boy scouts and girl guides. The reproductive health needs of young people in refugee and emergency situations are also being addressed. For example, UNFPA, in its joint efforts with UNHCR, has supported the training of teachers, community health workers and peer counsellors who are working with young Somali refugees in Kenya.

21. Activities to prevent sexually transmitted diseases (STDs), including HIV/AIDS, constitute an important component of UNFPA-supported reproductive health programming in the region. Under a joint UNFPA-UNHCR project, integrated reproductive health services, including for STD/AIDS prevention, are being provided to some 160,000 Somali refugees in Ethiopia. In collaboration with the International Planned Parenthood Federation (IPPF), UNFPA has established a reproductive health centre in Bosaso, Somalia, and trained 18 doctors, 45 nurses and 60 traditional birth attendants to provide a wide range of reproductive health services and counselling, including for the prevention and management of STD/AIDS and FGM. The prevention and management of STD/AIDS and FGM is also an integral component of all reproductive health activities supported in the Sudan.

22. Promoting women's reproductive rights is coupled with service provision in a number of UNFPA-supported projects and programmes in the region. For example, in the Occupied Palestinian Territories, in the town of Jenin, a network of 30 females and males has been created to conduct community-based outreach activities to promote, among other things, male responsibility in sexual and reproductive behaviour and women's reproductive rights. Support has also been provided by UNFPA to assist in upgrading the capacity of five local NGOs that are running 20 clinics providing reproductive health services. With UNFPA support, the Women's Centre in the Al-Bureij camp, in Gaza, has organized several community education workshops on women's rights, particularly reproductive rights. Individual and group counselling has been provided by a lawyer, employed by the centre, to women who have been victims of domestic violence.

23. Population and development strategies. With UNFPA assistance, national capacity for policy formulation, research and analysis has been institutionalized through extensive support to national population councils, their technical secretariats, as well as to national population research and data analysis centres. Support has also been provided for extensive training in demographic data collection and analysis to enable staff of the ministries of planning and other specialized institutions to conduct censuses and demographic and population research. Demographic databases have been established in most countries in the region.

24. Throughout the region, UNFPA has also provided assistance to strengthen national bodies with responsibilities for the advancement of women's status through improved legislation and economic and educational opportunities. For example, in 1997, UNFPA provided technical assistance to the Jordanian National Committee for Women and the Jordanian National Population Council to integrate gender concerns and reproductive rights into the national population strategy and the national plan of action for women's development. Similarly, the Fund provided assistance to the Government of the Syrian Arab Republic to develop a manual for gender training and guidelines for integrating gender issues into the national population policy.

25. UNFPA participated in a technical meeting that reviewed the pre-test of the Pan Arab Project for Child Development (PAPCHILD) reproductive health module. The Fund also participated in the conceptualization and finalization of the Pan Arab Project for Family Health (PAPFAM), a demographic and reproductive health survey (1998-2002) which includes the conduct of qualitative research studies. This multi-agency-funded effort is under the overall auspices of the League of Arab States which will be the main executing agency for the project.

26. Advocacy. A variety of advocacy activities were supported by UNFPA during the year, ranging from assistance to Egypt to support government and NGO advocacy efforts to raise awareness on the harmful practice of FGM, to support for sports competitions and musical events in Djibouti, on the occasion of World Population Day, which drew attention to the prevention of unwanted adolescent pregnancies and STD/AIDS. UNFPA is also supporting various advocacy strategies to address the issue of violence against women. Counselling and legal services to women are being integrated in the array of reproductive health services being offered, including to women who are caught in civil war conflicts or other emergency and post-crisis situations.

27. As part of its advocacy efforts to promote women's reproductive rights and eliminate discrimination against women and the girl child, the Islamic Educational Scientific and Cultural Organization (ISESCO) published two booklets entitled *Women Heroes* and *Fatima's Family*. Also, two regional projects, supported by UNFPA, seek to promote accurate interpretations of Islamic teachings and a better understanding of the position of Islam on women's rights as human rights.

28. The Fund has provided technical assistance to ministries of information, NGOs and health education units that undertake advocacy activities. In many countries, staff skills have been strengthened to enable the development of effective mass media and social mobilization campaigns to promote reproductive health and rights. In the Syrian Arab Republic, the Government and youth organizations, such as the Revolutionary Youth Union (RYU), continued nationwide campaigns to address the sociocultural and religious barriers that affect the health of young women, lead to early marriage and a confined social status. In the United Arab Emirates, efforts are under way to advocate social justice and gender equality and to promote women's employment in government institutions and their representation in the Parliament.

Central and Eastern Europe

29. Nineteen ninety-seven was a challenging year for the countries of Central and Eastern Europe. While progress has been made in recent years in improving the standards of living and overall well-being of the population, certain setbacks have also been witnessed, including civil unrest in Albania; a volatile peace process in Bosnia-Herzegovina; and increasingly limited job

opportunities for women in the region, leading to higher unemployment rates and subsequent declines in family incomes.

30. Reproductive health. The reproductive health situation in the region is diverse. In most countries maternal mortality rates and the incidence of abortion are declining, inter alia, due to increased use of modern contraceptives and growing awareness of the benefits of family planning. However, in a number of countries, growing opposition to reproductive rights is hampering people's unrestricted access to reproductive health information and services, and unsafe abortions remain a leading cause of maternal mortality and morbidity. There has also been an alarming increase in the prevalence of STDs, including HIV/AIDS, particularly among young people, in many countries in the region. In Ukraine, for example, data indicate a more than threefold increase in HIV infections from 1,499 in 1995 to 5,400 in 1996. Teenage fertility rates in the region are also climbing and are approximately three times as high as the average in Western Europe.

31. Consequently, increasing attention is being focused on adolescent reproductive health and efforts are under way to involve NGOs as partners to complement government efforts in improving the reproductive health situation of women, men and adolescents. A key event of the year was a regional meeting on youth and reproductive health held in Copenhagen, Denmark, in June. The meeting was attended by representatives of Governments, NGOs and national youth organizations. Organized by UNFPA and the Government of Denmark, in cooperation with the WHO Regional Office for Europe, the meeting provided opportunities to: share country experiences in dealing with reproductive health issues; promote greater awareness and understanding of the reproductive needs of young people; and develop strategies to address those needs. The recommendations of meeting will guide UNFPA in responding more effectively to young people's reproductive health needs.

32. UNFPA is also supporting training in the provision of reproductive health services. For example, the Fund is providing assistance to the reproductive health training centre in Armenia which was established in 1997. In Romania and Ukraine, UNFPA is supporting reproductive health training for medical professionals. A number of STD/AIDS-prevention activities, supported by the Fund, have been undertaken in the region, including the provision of condoms and other contraceptive commodities; training of service providers; and the development and incorporation of HIV/AIDS education components in sex education programmes. During 1997, the Fund provided emergency contraceptive supplies, including condoms, to Armenia, Bulgaria and Georgia.

33. Several countries in the region continued to host large numbers of refugees and internally displaced persons, including Armenia, Bosnia-Herzegovina, Croatia, Georgia and the Russian Federation. The Fund has provided support to Marie Stopes International and its local partner Stope Nade to provide reproductive health information and services in several collective centres in Bosnia-Herzegovina.

34. Population and development strategies. Building and strengthening national capacity in data collection and analysis remained an important aspect of UNFPA support in the region. In Moldova, UNFPA, together with UNICEF and the United States Agency for International Development (USAID), funded the country's first reproductive health survey. In Armenia, the Fund supported a knowledge, attitudes and practice (KAP) survey, which, inter alia, found that the abortion rate was twice as high as officially reported.

35. All countries in the region are currently preparing for the 2000 round of population and housing censuses. For most this will be the first population census since gaining independence in the early 1990s. Many of these countries lack the capacity and the financial resources required for preparing, collecting, analysing and disseminating population and housing census data. Recognizing this, UNFPA, together with the Economic Commission for Europe (ECE), convened a donors meeting on 26 September 1997 in Geneva, to facilitate the mobilization of financial resources from the international community. UNFPA has agreed to coordinate follow-up to this meeting, including facilitating the exchange of information among donor countries and agencies and recipient countries on the requirements for training, equipment and supplies, and technical and financial assistance. Meanwhile, UNFPA and UNDP are supporting a pilot census in Armenia. This will provide valuable inputs for the implementation of the 1999 population and housing census. UNFPA is also funding a regional census training project, executed by the ECE, to train staff of national statistical offices for the forthcoming round of censuses.

36. Advocacy. Throughout the region, the role of civil society and NGOs in advocating for reproductive health and rights has become increasingly visible. In keeping with the ICPD Programme of Action, UNFPA is actively promoting partnerships among Governments, NGOs and groups in civil society. In this regard, strengthening the capacity of NGOs continues to be a priority area for the international community.

37. Advocacy for adolescent reproductive health is a key area receiving UNFPA attention and assistance. For example, in Albania, the Fund is supporting a novel project implemented by Population Services International (PSI), in close collaboration with Radio Tirana. A weekly, 30-minute radio show provides young Albanians with accurate information on a range of reproductive health issues. The format of the show is designed to attract young people and includes guest speakers, call-in opportunities and round-table discussions interspersed with news updates, music and entertainment. In Romania, UNFPA is providing financial assistance to the Youth for Youth Foundation, a local youth NGO, for an extensive information and awareness-creation programme aiming at the reduction of the incidence of unwanted pregnancies and STDs among adolescents. In the Russian Federation, UNFPA is supporting the Russian Family Planning Association (RFPA) in developing a sex education programme for out-of-school youth.

ASIA AND THE PACIFIC

38. During 1997, the countries of Asia and the Pacific region continued their efforts towards achieving the goals of the ICPD Programme of Action. To this end, UNFPA support was provided to assist countries, inter alia, in improving quality of care, addressing the reproductive health needs of adolescents, and strengthening national capacity to conceptualize, plan and implement the reproductive health approach. In the process, a noticeable expansion of collaboration with NGOs was achieved. Countries in the region also demonstrated increasing support for South-South cooperation.

39. While most Asian countries have long experience in population planning and programming, and national execution has been the principal mode of executing UNFPA assistance, efforts to implement the ICPD goals, especially the reproductive health approach, have required an upgrading of this capacity. Consequently, in 1997, as in the previous year, UNFPA continued to support relevant training for service providers, policy makers, programme managers and other government officials, in, for example, Bangladesh, Cambodia, the Central Asian countries, Nepal, Sri Lanka and Viet Nam.

40. The ICPD Programme of Action highlighted the importance of expanding partnerships with NGOs and civil society. In line with this, countries in the region are widening the participation of NGOs in population and reproductive health programmes. NGOs have lent themselves particularly well to efforts to promote gender sensitization and reproductive health, including through advocacy and IEC campaigns. It should be noted that in addition to capitalizing on NGO areas of comparative advantage, UNFPA is increasingly focusing attention on strengthening NGO capacities and sustainability, inter alia, through supporting training for NGO staff.

41. Reproductive health. The operationalization of the reproductive health approach constituted the bulk of the activities UNFPA supported in the region. Efforts concentrated on a range of actions designed to assist countries to move the process forward and to broaden the array of services made available in the context of reproductive health care. These efforts were accompanied by pertinent IEC and advocacy activities. In many instances, initiatives begun in earlier years showed concrete results in 1997.

42. Sri Lanka is among the first countries to have developed a national reproductive health policy. In July, Thailand took an important step toward the full implementation of the reproductive health approach advanced by the ICPD Programme of Action by announcing a reproductive health policy that grants all individuals, regardless of age and marital status, access to reproductive health information and services. In this regard, the Ministry of Health has announced a ten-component package of reproductive health services to be delivered through the public health system with an

emphasis on quality of care and reaching underserved groups, including adolescents. Similarly, Bhutan and Mongolia have also developed national reproductive health strategies.

43. Bangladesh is actively promoting partnerships with NGOs, particularly those that have proved effective in providing reproductive health services in low-performing areas. Under the new programme of assistance to Bangladesh, 10 per cent of regular resources will be channeled through NGOs. Similarly, in India, 10 per cent of programme funds will be allocated to activities undertaken by NGOs, under the new programme of assistance. In Nepal, collaboration has been expanded with NGOs active in reproductive health service delivery. Meanwhile, in Sri Lanka, UNFPA has supported the mobilization of NGOs to include reproductive health as part of their work programme. In this regard, PEACE (an NGO working to combat child prostitution) has been assisted in carrying out reproductive health activities. NGOs in Sri Lanka are also playing a key role in providing information and services to adolescents, displaced persons and young female workers.

44. The shift towards an integrated reproductive health approach requires in many instances that countries surmount important constraints that derive, for example, from a shortage of trained staff or infrastructure weaknesses, as, for example, in Democratic People's Republic of Korea where the strengthening of national capacity and infrastructure for improved quality of reproductive health care, including family planning, were the focus of UNFPA assistance. Governments in several countries, for example, Papua New Guinea, have set in motion programmes to train and retrain health staff at various levels, on such subjects as reproductive health, adolescent sexuality and rights, and the role and responsibility of men in reproductive health. In Myanmar, UNFPA support includes training of health personnel in reproductive health service delivery at the township level. In the South Pacific, UNFPA continued to build on the post-ICPD momentum in the area of reproductive health by strengthening various institutions in close collaboration with the Governments of the subregion. This included support to the Regional Training and Research Centre.

45. UNFPA's initial programme of emergency assistance to the Central Asian Republics (Kyrgyzstan,Tajikistan,Turkmenistan,Uzbekistan), Azerbaijan and Kazakhstan has now evolved into a comprehensive programme of national capacity-building for reproductive health services. In partnership with international NGOs and United Nations agencies, 20 reproductive health training centres were established and some 2,600 staff received training in the area of quality of care. The provision of medical equipment, contraceptives and essential drugs have also contributed to the upgrading of services and the broadening of contraceptive choice.

46. Quality-of-care considerations are a pervasive concern in the countries of the region and an important programme dimension of UNFPA support. For example, the national curriculum for training in quality of care in reproductive health was revised in Indonesia. In India, five pilot district reproductive health projects were launched and will provide lessons on how to implement a

reproductive health quality of care approach that emphasizes sensitivity to client needs and stimulates community participation. Efforts to reorient the reproductive health/family planning programme, in line with the recommendations of the ICPD Programme of Action, continued in the Islamic Republic of Iran and were marked by an emphasis on quality of care that included focusing on greater male involvement in reproductive health. Also, with UNFPA assistance, the Government made notable progress in addressing sensitive issues such as adolescent reproductive health, sex education, and the prevention of STDs/AIDS. The country's first national workshop on adolescent health was held in 1997 and marked the beginning of nationwide activities in this key area.

47. Addressing the reproductive health needs of adolescents and young people is a growing area of concern in the region, and many countries are making efforts to reach this important population group. For example, Indonesia has established several counselling centres for adolescents. In India, UNFPA has organized a core group of governmental and non-governmental organizations to propose alternative strategies for addressing adolescent reproductive health issues, particularly those related to the adolescent girl. Countries of the region also continued their efforts to mainstream gender sensitivity in their programmes. Often these efforts were coupled with initiatives to bring about greater involvement of men, as husbands and partners, in reproductive health decisions. For example, government officials from Pakistan attended a workshop on "Men as Partners" held in Kenya, and, as a follow-up, a series of workshops were organized in Pakistan on issues related to male responsibility in reproductive health.

48. Population and development strategies. Progress in consolidation of the reproductive health approach needs to be sustained by parallel efforts to enhance national capacity to integrate population dimensions into national policies, plans and programmes. Often, this involves technical training in the collection, analysis and use of population data, and the Fund supported many such activities in 1997. To help develop national expertise in population and development strategies in the countries of Central Asia, government officials have been exposed to the experience of other countries in this sector. A national workshop on population policy development was organized in Kazakhstan to illustrate the impact of population trends on policy decisions and technical assistance and other support was provided for preparations of the 2000 round of censuses. In the Islamic Republic of Iran, two workshops on population and development were organized at which the impact of socio-economic factors on population growth and population distribution was discussed extensively.

49. Mongolia established a national task force to coordinate and monitor activities in population and development. Papua New Guinea has undertaken to update its national population policy so that it is fully in line with ICPD goals. Significant progress was achieved in all preparations for the first national census to be held in Cambodia. In Viet Nam, UNFPA continued to strengthen capacity-building at the Ministry of Planning and Investment and at the Ministry of Health. Support was

provided to build capacity at the local level. The Fund has also collaborated closely in the UNDAF process under way in Viet Nam. For many countries of the region, in an effort to strengthen national capacity, UNFPA supported numerous study tours and fellowships.

50. Advocacy. UNFPA supported a range of advocacy activities in the region to build the momentum of progress towards achieving ICPD goals, including the commitment of national resources; to catalyze national consensus and public support; and to promote collaboration among various stakeholders, including the Government, civil society, national teaching and research institutions, and NGOs. In some countries, advocacy and IEC efforts also focused on the sensitization of religious leaders to reproductive health and family planning issues. For example, study tours were organized for religious leaders from Pakistan to visit programmes in Bangladesh and Indonesia.

51. Proactive promotion of the ICPD Programme of Action was a major undertaking in the South Pacific subregion. Advocacy activities involved media personnel, decision makers, programme implementors, politicians and national NGOs. In response to the commitments made at various international conferences, the Governments of the South Pacific countries convened the Pacific First Ladies Conference on "The Family, Women and Opportunities".

52. A number of countries undertook activities to mobilize the involvement of parliamentarians in population and development issues. In Pakistan, for example, the Parliamentary Group on Population and Development was reconstituted with 40 member parliamentarians; the group began its activities by initiating a dialogue with the Asian Forum for Parliamentarians on Population and Development. In Viet Nam, UNFPA supported the Government in conducting a workshop to discuss ICPD issues and to organize two national advocacy seminars on "Women's Empowerment in the Population and Development Programme" and "Adolescent Reproductive Health". The workshop and seminars resulted in greater support from political leaders and parliamentarians. In Nepal, advocacy has helped increase the involvement of NGOs in providing adolescents and women with reproductive health information and services. In the Philippines, NGOs have been especially effective in the area of advocacy, particularly in promoting innovative approaches for reproductive health service delivery.

LATIN AMERICA AND THE CARIBBEAN

53. In 1997, the work of UNFPA in the areas of population and reproductive health in Latin America and the Caribbean region reflected broad themes of the social sector such as the need to increase efficiency and fairness in the delivery of basic services, including through involving NGOs; the need to improve databases for service planning; the ongoing decentralization of budgets and operations to local governments; and the effort to achieve a sustainable distribution between private

and public costs. Special efforts have been made in the last few years to ensure that civil society and NGOs are included in building national capacity.

54. Reproductive health. Efforts to operationalize reproductive health programmes have been pursued vigorously through the region's country programmes as well as through multi-country, regional activities. To this end, in October, a meeting was held in Peru to build consensus on regional strategies. Efforts are under way with the Pan American Health Organization (PAHO) of WHO to clarify and promote the concept of reproductive health, study the institutional arrangements for its implementation, seek improvements in quality, and find appropriate programme designs to make services accessible to adolescents. To improve the quality of reproductive health services and to expand the options that are available, the Fund initiated support for a research project to learn more about the reasons for the extensive use of surgical sterilization of women in the region. One of the focuses of that research will be to verify whether coercion is involved and to what extent women are making informed choices.

55. The need to build capacity for management of social programmes is being addressed throughout the region. The UNFPA CST based in Santiago, Chile, includes expertise in this area, which is being made available to countries in the region. This has been further supported by specific efforts with WHO/PAHO in the field of management of reproductive health services. The training of CST advisers in contraceptive logistics management is expected to be replicated by cascade training within the team and, most importantly, throughout the region.

56. The regional strategy explicitly favours NGOs and grass-roots groups, notably those of women and youth. Most country and regional projects supported in the region have NGOs as important partners in design and implementation. While the efficiency of NGOs in delivering quality reproductive health services is widely established, they do face certain challenges concerning sustainability and scope of coverage. A regional meeting with NGOs, held in Quito, Ecuador, showed that there is still much to be accomplished to ensure that NGOs find their place in national agendas. As a follow-up to the meeting, national workshops based on an inter-agency, collaborative approach have been held or are planned in some 15 countries of the region. An innovative project was started in 1997, designed to eventually reach a quarter of a million unionized workers through their regular education programmes. The project will introduce components dealing with reproductive health and reproductive rights with a gender perspective into those programmes.

57. Successful initiatives with NGOs in the region abound. In Paraguay, for example, UNFPA collaborated with the national NGO PROFAMILIA, the national obstetric and gynaecological association and the Ministry of Health to organize the First Paraguayan Congress on Reproductive Health and Family, held in October. The congress was attended by over 200 professionals and was declared an event of national interest by the country's Parliament. It received extensive coverage

in the media and had a great impact on the country's NGOs, scientific and medical community, professional institutions and public opinion.

58. Adolescent reproductive health is a significant concern throughout Latin America and the Caribbean region. A major regional meeting on the topic was organized by UNFPA in Costa Rica in December. The meeting concluded that while access to information and services is crucial, countries must take an integrated, multi-sectoral and inter-institutional approach in order to provide youth with educational and economic opportunities that offer them alternatives to early childbearing and exposure to STD/HIV. The meeting also underscored the importance of ensuring the involvement of young people in designing programmes that address their needs.

59. All of the Fund's country programmes in the region have components dealing with adolescent reproductive health concerns. Nicaragua has the highest rate of teenage pregnancy in Central America, with one out of every four pregnancies occurring among adolescents. The Fund has, therefore, developed a subprogramme focusing solely on adolescent reproductive health and designed to improve the access of young people in Nicaragua to quality reproductive health education and services in ten priority departments, both rural and urban. At the institutional level the subprogramme is supporting vigorous advocacy efforts to promote the formulation of norms, policies and programmes for adolescents.

60. In Guatemala, UNFPA supported a study on youth gangs called "maras", whose members are subject to both high reproductive health and social risks. The information obtained in the study showed the need for various initiatives in addressing the problems; UNFPA will provide support for those that fall within its mandate. In the Caribbean, the new subregional programme, which started in 1997, emphasizes adolescent reproductive health and rights, while moving away from the past focus on "women in union". Guyana, Jamaica and Suriname were identified as countries of special concern for these initiatives.

61. Population and development strategies. Training of personnel at all levels in governmental and non-governmental institutions in the use of data and in management systems is a cornerstone of successful capacity-building under decentralization processes that are taking place throughout the region. To this end, both national and regional projects include such training. For example, in the Caribbean region, a subregional approach to training in population and development strategies was designed involving the principal institutions of higher learning -- the University of Guyana, the University of Suriname and the University of the West Indies.

62. An important area in building national capacity is to help countries develop their ability to collect and use population and reproductive health data. Such capacity-building included support for planning, in conjunction with the Population Division of the Economic Commission for Latin

America and the Caribbean (ECLAC) and the United Nations Statistical Division, of a series of workshops to review the experience of the round of censuses that took place in 1990 and to prepare for the year 2000 censuses. Work on data collection and analysis during the year also included such activities as cooperation in Peru with the Ministry of Women's Advancement and Human Development (PROMUDEH) and the National Statistics Office to produce a publication and a CD-ROM with data from the 1993 census, to update national population estimates and projections and to produce thematic maps designed to support preventive interventions in light of the "El Nino" weather phenomenon. The work was highly praised by the Government and emergency agencies.

63. Efforts supported by UNFPA and donors have enabled the Latin American Demographic Centre (CELADE) to develop a software called REDATAM which allows the utilization of several databases for local planning in education and health. A related subregional project in Central America (Plan 2000) also aims at developing systems for decentralized planning. In the Caribbean subregion, a project is being implemented with ECLAC on completion of the REDATAM data sets using data from the 1990-1991 censuses as well as training nationals in the use of the REDATAM computer programme for data analysis and policy development. One such activity took place in the Bahamas at the invitation of the Government, and a second one is planned for Jamaica in the first half of 1998.

64. Advocacy. During the year, UNFPA organized or participated in several events that specifically advocated for the central issues of the ICPD Programme of Action, especially the reproductive health and rights of women and young people. The Fund helped shape a United Nations system-wide effort led by UNIFEM to support a campaign by women's groups to give visibility to the issue of preventing violence against women. UNFPA has been mobilizing field offices to support this important advocacy campaign.

65. In the area of advocacy for reproductive health and rights, the Fund explicitly emphasized linkages with NGOs, parliamentarians, journalists, policy makers and political leaders. Throughout the region a variety of public relations and promotion events were undertaken during the course of the year . These included such activities as public forums on male responsibility in Jamaica as part of Fathers' Day events; a series of events, including workshops, seminars, roundtables, and special meetings, to observe World Population Day in Cuba; the production of two videos on gender issues in Guatemala; and ceremonies to celebrate the 25th anniversary of the Fund's activities in Paraguay. These kinds of advocacy activities were organized by UNFPA country offices throughout the year and worked to keep population and reproductive health in the forefront of public consciousness and on the agendas of national policy makers.

INTERREGIONAL PROGRAMMES

66. During 1997, the second year in the four-year cycle of the current intercountry programme, UNFPA continued to support a variety of research, advocacy and training activities by NGOs and other United Nations organizations that have ramifications at a global level. Selected examples of these activities are presented below.

67. Reproductive health. The activities supported by UNFPA in the area of reproductive health are geared towards, inter alia, researching new methods of safe and effective contraception, developing tools for diagnosis of STDs, expanding the availability of contraceptives, and providing information to technical and managerial personnel involved in reproductive health services. During 1997, the Fund also supported research and related activities in an area that it considers to be of the highest priority -- adolescent reproductive health.

68. A common agenda and framework to facilitate activities in the promotion of policies and programmes for reproductive health services for adolescents have been developed by a combined WHO/UNFPA/UNICEF technical group on programming for adolescent health. Parallel to this effort was the initiation of the groundwork for trials and a feasibility study of integrated approaches for systematic programming to improve adolescent reproductive health, which will involve the Philippines, Sri Lanka and Uganda.

69. UNFPA supported research projects with WHO and The Population Council on a number of fertility-regulating methods. At The Population Council, research continued on several methods of contraception, including contraceptive rings, subdermal implants for women, the transdermal system for women, spermicides and microbicides. As part of the WHO Special Programme of Research, Development and Research Training in Human Reproduction (HRP), which UNFPA co-sponsors with UNDP and the World Bank, acceptability studies were conducted on the female condom in several countries and data were collected for a multi-centre study on the use and acceptability of the calendar method of fertility regulation. Research on additional fertility-regulating uses of antiprogestogens continued. Research on new injectables for women were conducted, as were activities related to male contraception, such as hormonal methods of inhibiting sperm production and the use of plant-derived products. Male contraceptive methods under investigation also included subdermal implants, the transdermal system, and an immunocontraceptive. Research work continued on methods of emergency contraception. In the field of STD prevention and diagnosis, HRP is collaborating with UNAIDS and a number of NGOs and other agencies in studies on the acceptability and STD-preventing capability of new barrier methods, vaginal microbicides and a vaccine against chlamydial genital tract infection. The Programme for Appropriate Technology in Health (PATH) conducted studies and field trials of one-step tests for accurate diagnosis of syphilis and gonorrhoea.

70. As part of the effort to strengthen reproductive health programmes, a project with WHO is in the process of producing several guidelines, including on the prevention, early diagnosis and management of cervical cancer; on the prevention and care of STDs, including HIV/AIDS, in reproductive health services; and on improving access to quality care in family planning. The main effort in facilitating the availability of contraceptives to countries is the Global Initiative on Contraceptive Requirements and Logistics Management Needs in Developing Countries. This is detailed in part II of this annual report.

71. UNFPA continued its support for activities at the intercountry level for South-South cooperation in the area of reproductive health. Centres for South-South cooperation have been established in Indonesia, Mexico, Thailand and Tunisia on the basis of the success of these countries in implementing national programmes related to reproductive health and their experience in sharing such success with other developing countries. During the last year, UNFPA-funded projects in each of these centres facilitated the training of programme managers and service providers from other developing countries. In April 1997, representatives of the four centres met at UNFPA headquarters to share experiences and to discuss the institutional and financial sustainability of the centres. Their examination found, among other things, that the activities of the centres reflect careful planning and a strong commitment to sharing lessons learned.

72. During 1997, the intergovernmental initiative "Partners in Population and Development", launched at the ICPD by 10 countries (Bangladesh, Colombia, Egypt, Indonesia, Kenya, Mexico, Morocco, Thailand, Tunisia and Zimbabwe), strengthened its field activities. At its 1997 Board meeting, the Partners accepted China and Pakistan as new members and adopted a strategic framework, an operational plan and a communication strategy. The Partners' Secretariat, located in Dhaka, Bangladesh, was consolidated as a central point for networking and for identifying South-South opportunities in the field of reproductive health. The Secretariat promoted the formulation of initiatives in east and west Africa, Colombia, Indonesia and Mexico.

73. Population and development strategies. In the key area of population and development strategies, UNFPA supported the development and use of new methodologies in data collection, processing and dissemination. A project being executed by the Food and Agriculture Organization (FAO) is developing planning and management tools to facilitate the integration of demographic variables into forestry planning. A second FAO-executed project focuses on the population dynamics in artisan fishing communities by integrating population concerns into fisheries research programmes and into the training of staff of fisheries development agencies in south-east Asia, south Asia, west Africa and east Africa.

74. Support continued for activities promoting the use of a geographical information system software (POPMAP) and the Population Information Network (POPIN). An evaluation of POPMAP

found the software easy to use and uniquely suited to the needs of developing countries. The POPIN project has been assessed as exceptionally successful in disseminating population information in an innovative and cost-effective fashion.

75. In 1997, UNFPA supported research activities of several organizations, such as the efforts of the Committee for International Cooperation in National Research in Demography (CICRED), to promote collaborative research among demographic research centres in developing countries. In a Fund-supported project with Brown University, migration experts are being trained to work on population distribution in their countries, develop survey instruments and sample designs and use the resulting findings as the basis for policy formulation and evaluation. The first of a series of workshops was held in Hanoi, Viet Nam, in 1997. Support was also provided for research conducted by the World Conservation Union (IUCN), on the integration of population and environment in strategies for sustainable development. The IUCN published a book in great demand, entitled *Population and Strategies for Sustainable Development*, which serves as a resource for national-level policy makers and the staff of conservation organizations.

76. A number of projects were devoted to dissemination of population research. UNFPA and Harvard University jointly published Volume 20 of the *Annual Review of Population Law* and the Center for Communication Programs at Johns Hopkins University disseminated a searchable database of 250,000 bibliographic abstracts on CD-ROM to developing countries.

77. To help ensure the availability and quality of population and reproductive data, UNFPA funded a workshop on the application of new technologies for database management and data dissemination, which was held in Addis Ababa from 3-8 November 1997. Participants from 32 countries from Africa, Asia and the Caribbean participated in the workshop. The International Union for the Scientific Study of Population (IUSSP) held its XXIIIrd Population Conference in Beijing, co-sponsored by UNFPA, which held a special session on the implementation of the ICPD Programme of Action.

78. Under the Global Training Programme in Population and Sustainable Development, a major component of the Fund's efforts in the area of population and development strategies, an Expert Group Meeting was convened by UNFPA in February 1997. The Expert Group made a number of recommendations with respect to substantive issues in curriculum development, as well as with respect to operations and management issues. Subsequently, the Scientific Advisory Committee met in Rabat, Morocco, in June 1997 to follow up on the recommendations of the Expert Group. There was a wide-ranging discussion of both the substantive content of the programme and of problems related to the presentation of courses to trainees of diverse backgrounds and skill levels. The Committee reviewed all the instructional materials and underscored the need to revise them to more explicitly reflect the ICPD Programme of Action. The Committee also explored the possibility of

offering short courses on particular topics in population and sustainable development at selected centres in addition to the regular nine-month diploma courses that it is currently providing.

79. Advocacy. Several research initiatives were conducted in the area of advocacy. A UNESCO-executed project focused on sociocultural factors affecting demographic behaviour and their implications for the formulation and execution of population policies and programmes, while the Society for International Development (SID) conducted research on reproductive health, empowerment and population policy. Several NGOs received support in the area of information dissemination, including The Population Institute, The Guttmacher Institute, Planet 21 and the Earth Times. The Centre for Development and Population Activities and Advocates for Youth participated in activities related to the development of training and advocacy prototype materials on such issues as the education of girls, adolescents, the importance of male involvement, and the development of a database on adolescent reproductive health. The International Labour Organisation (ILO) was supported in a project aimed at increasing the interest and capacity of ILO's partners in the labour sector to develop programmes for workers that promote responsible family life, gender equality and reproductive health.

80. In the area of education, several undertakings were accomplished in 1997 with UNESCO as a major collaborator. A meeting of the Education For All Forum Steering Committee was held in Paris in October 1997 to review progress in key areas under the Education For All initiative. Among findings discussed at the meeting was an indication that teaching adolescent mothers about early childhood development could lead to a reduction in repeat pregnancies. Documentation on this point is limited to date but shows the need for further research. Another area of collaboration with UNESCO was through the interregional project "Promotion of Population Education at the University", which undertook a number of activities during 1997. The "Nine High Population Countries (E-9) Initiative" was launched by UNESCO, UNFPA and UNICEF in 1992 to draw the world's attention to the actions of the largest countries in meeting their population challenges and to provide opportunities for them to share problem-solving strategies. Meetings of ministers and staff have been held periodically since then. A Ministerial Review was held in Islamabad in September 1997. Some of the initiatives reported at that meeting included: (a) Nigeria has enacted a law to prohibit removal of girls from school for the purpose of marriage; (b) Mexico has emphasized pre-school education for girls, having documented that this helps prevent later drop-out; and (c) Egypt has developed a video-conferencing programme for teacher training in 26 remote centres.

81. At the "Adult Learning: A Key for the 21st Century -- 5th International Conference on Adult Education", UNFPA sponsored a high-level panel. An article on population education for adults prepared by UNFPA for the *International Journal of Adult Education and Development* became part of the background information for the conference. The paper and subsequent UNFPA presentation to the plenary addressed the importance of linking the health and education systems, using the reproductive life cycle to illustrate points of entry.

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